

1 GENERAL GOVERNMENT CABINET

2 Board of Dentistry

3 (New Administrative Regulation)

4 201 KAR 8:580. Charity dental practices.

5 RELATES TO: KRS 313.254

6 STATUTORY AUTHORITY: KRS 313.021, 313.254

7 NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.021(1) requires the board to exercise all of
8 the administrative functions of the Commonwealth in the regulation of the profession of dentistry, KRS
9 313.060 requires the board to promulgate administrative regulations relating to dental practices, and
10 KRS 313.254 requires the board to promulgate administrative regulations relating to the charitable
11 practice of dentistry. This administrative regulation establishes requirements for charitable dental
12 practices.

13 Section 1. Minimum Documentation Standards for All Dental Patients of a Charitable Dental Practice.

14 Each patient record for a dental patient of a charitable dental practice in the Commonwealth of Kentucky
15 shall include at a minimum:

- 16 (1) The patient's name;
- 17 (2) The patient's date of birth;
- 18 (3) The patient's medical history;
- 19 (4) The patient's dental history;
- 20 (5) The patient's current medications from all healthcare providers;
- 21 (6) The date of current treatment;

- (7) The diagnosis;
- (8) The treatment options presented to the patient;
- (9) The tooth number and surfaces to be treated, which shall be included in the progress notes;
- (10) The patient's current blood pressure reading;
- (11) Informed consent by the patient; and
- (12) Signature or initials of the provider.

Section 2. Documentation of Infection Control Procedures. All charitable dental practices in the Commonwealth of Kentucky shall adhere to the universal precautions outlined in the "Guidelines for Infection Control in Dental Health-Care Settings" published by the Centers for Disease Control and Prevention and shall retain documentation proving that:

- (1) All workers have been educated in the charitable dental practice or ~~post-disaster clinic~~ procedures for infection control;
- (2) All workers involved in patient treatment ~~of~~ have received a Hepatitis B vaccination or have signed a waiver;
- (3) A policy is in place requiring all staff involved in clinical patient care to wear a fresh set of gloves for each patient;
- (4) A policy is in place to assure all staff change gloves between patients;
- (5) A policy is in place to assure all staff wears protective clothing during patient care;
- (6) A policy is in place to assure all staff wear mask during procedures that may involve spatter;
- (7) The charitable dental practice contains the necessary supplies to comply with this administrative regulation
- (8) All hand-pieces are sterilized following each patient treatment by one (1) of the following means:

- 1 (a) Autoclave;
- 2 (b) Dry heat; or
- 3 (c) Heat or chemical vapor.
- 4 (9) There is routine verification that sterilization methods are functioning properly;
- 5 (10) Individual burs, hand instruments, and rotary instruments are either discarded or sterilized
- 6 following each use;
- 7 (11) A policy is in place that addresses the disinfection of all operatory equipment and surfaces
- 8 between patients;
- 9 (12) All surfaces that are difficult to disinfect shall be covered with a non-penetrable barrier;
- 10 (13) A policy is in place requiring that all non-penetrable surfaces are changed between patients;
- 11 (14) Disinfectant is used, including the name and type of the disinfectant;
- 12 (15) A policy is in place which describes a separate place for the cleaning, disinfecting, and
- 13 sterilization of items, with a mechanism of separation from the patient treatment area that may
- 14 be:
- 15 (a) An enclosed instrument table;
- 16 (b) Curtains or wall separation; or
- 17 (c) Bagging of the instruments;
- 18 (16) A policy is in place which provides for the protection of dental records, charts, and
- 19 radiographs from biohazards while those items are in the patient treatment area, or if no
- 20 protection exists, charts shall be readily reproducible with limited effort; and
- 21 (17) An agreement exists with an agency to properly dispose of all medical waste and bio-
- 22 hazardous material, including sharps, instruments, and human tissue.

23 Section 3. Infection Control Inspections.

(1) The board or its designee may perform an infection control inspection of a charitable dental practice utilizing the Infection Control Inspection Checklist.

~~(2) “Infection Control Inspection Checklist”.~~

(2) Any charitable dental practice that is found deficient upon an initial infection control inspection shall not be allowed to continue until the clinic coordinator provides proof to the board that the charitable dental practice is in compliance.

Section 4. General Requirements for Charitable Dental Practices. All charitable dental practices in the Commonwealth shall comply with the following requirements:

(1) The clinic coordinator, who shall supervise and oversee all charitable dental practice functions, shall be a Kentucky licensed dentist;

(2) There shall be a functional radiograph machine on site;

(3) Follow-up care provisions shall be in place for each patient requiring follow-up care;

(4) A written blood-borne pathogen exposure control plan shall be kept on site;

(5) A sharps stick protocol shall be followed in which:

(a) The entity that will collect specimens shall be identified prior to the start of the event; and

(b) The laboratory that will perform blood work analysis shall be identified prior to the start of the event.

(6) Post-operative instructions shall be delivered to the patient prior to the patient leaving;

(7) No dentist shall supervise more than six (6) students in a charitable dental practice or ~~post-~~ disaster clinic;

(8) All procedures shall be concluded by the end date of the charitable dental practice unless a Kentucky licensed dentist has stated in writing that the licensee shall complete the procedure in a timely manner at his practice;

(9) All charitable dental practices shall notify the board no less than thirty (30) days prior to the start of an event of the dates, locations, and host of the event;

(10) A charitable dental practice shall provide the names and license numbers of all participating dentists and dental hygienists no later than fifteen (15) days post-event;

(11) A prescription for a narcotic shall not be written during an event unless approved by a designated dental prescription coordinator who shall hold a full license to practice dentistry in the Commonwealth of Kentucky. The prescription shall be approved if it is medically appropriate;

(12) A written emergency medical response plan shall be kept on site; and

(13) All charitable dental practices larger than forty (40) chairs shall have at least one (1) Basic Life Support (BLS) ambulance on site for the duration of the event.

Section 5. Registered Dental Assistants and Auxiliary Personnel.

(1) For the purpose of a charitable dental practice any individuals other than a licensed dentist or licensed dental hygienist shall be restricted to the duties of a dental auxiliary; and

(2) A radiograph shall not be taken unless the person performing the x-ray has met the requirements of 201 KAR 8:570.

Section 6. Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) “Guidelines for Infection Control in Dental Health-Care Settings”, December 2003; and

(b) “Infection Control Inspection Checklist”, July 2010.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky, 40222, Monday through Friday, 8:00 a.m. to 4:30 p.m. This material is also available on the

1 board's Web site at <http://dentistry.ky.gov>.

DR. C. Mark Fort, DMD, Board President

November 29, 2010

Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD: A public hearing on this administrative regulation shall be held on Tuesday, January 25, 2011 at 9:00 a.m. at the office of the Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, KY 40222. Individuals interested in being heard at this hearing shall notify this agency in writing no later than January 24, 2011, of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be canceled. This hearing is open to the public. Any person who wishes to be heard will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made.

If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted until January 31, 2011.

Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

Contact person: Brian K. Bishop, Executive Director, Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, KY, 40222. Phone (502) 429-7280, fax (502) 429-7282, email briank.bishop@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Administrative Regulation #: **201 KAR 8:580. Charity dental practices and post-disaster clinics.**

Contact Person: Brian K. Bishop, Executive Director
Board of Dentistry

(1) Provide a brief summary of:

(a) What this administrative regulation does: **This administrative regulation establishes requirements and procedures dentist as related to documentation of patient records, infection control, and requirements to hold a charity clinic as required by KRS 313.060 and KRS 313.254.**

(b) The necessity of this administrative regulation: **This administrative regulation is necessary to implement KRS 313.060 and KRS 313.254, which requires the board to promulgate administrative regulations regarding the requirements for documentation in a patient record, infection control, and requirements to hold a charity clinic.**

(c) How this administrative regulation conforms to the content of the authorizing statute: **This administrative regulation is necessary to implement KRS 313.060 and KRS 313.254, which requires the board to promulgate administrative regulations regarding the requirements for documentation in a patient record, infection control, and requirements to hold a charity clinic or post disaster clinic.**

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: **This administrative regulation is necessary to implement KRS 313.060 and KRS 313.254, which requires the board to promulgate administrative regulations regarding the requirements for documentation in a patient record, infection control, and requirements to hold a charity clinic or post disaster clinic.**

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: **N/A**

(b) The necessity of the amendment to this administrative regulation: **N/A**

(c) How the amendment conforms to the content of the authorizing statute: **N/A**

(d) How the amendment will assist in the effective administration of the statutes: **N/A**

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: **The Kentucky Board of Dentistry will be affected by this administrative regulation. Additionally, any entity who desires to have a charity clinic in the Commonwealth will be affected.**

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment: **The Kentucky Board of Dentistry is charged by KRS 313 et. al to regulate the practice of dentistry in the Commonwealth. This regulations provides guidance to individuals who desire to offer a charity clinic in the Commonwealth and gives direction to protect the public during these clinics.**

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): **The Board is a self funded agency who's budget was approved in HB 1 of the 2010 Extraordinary Session of the General Assembly. HB 1 provided for FY 2010 – 2011 an allotment of \$705,400 and for FY 2011 – 2012 and allotment of \$714,000. The cost to the entities desiring to offer a charity clinic is unknown.**

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3): **The Kentucky Board of Dentistry is the regulatory agency and accrues no benefits from the regulations but rather provides enforcement of the chapter and processes for it licensees offer a charity clinic in the Commonwealth.**

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation: **The Board is a self funded agency whose budget was approved in HB 1 of the 2010 Extraordinary Session of the General Assembly. HB 1 provided for FY 2010 – 2011 an allotment of \$705,400 and for FY 2011 – 2012 and allotment of \$714,000. The Kentucky Board of Dentistry receives no monies from the General Fund.**

(a) Initially: **No additional costs are expected.**

(b) On a continuing basis: **No additional costs are expected.**

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: **The Kentucky Board of Dentistry is a fully self funded agency and derives it funding from fees paid by it licensees.**

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: **The fees found in 201 KAR 8:520E make the agency financially solvent.**

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees: **This administrative regulation does not establish fees or directly or indirectly increase any fees.**

(9) TIERING: Is tiering applied? **Tiering was not appropriate in this administrative regulation because the administrative regulation applies equally to all individuals or entities wishing to host a**

charity clinic or post disaster clinic.

FISCAL NOTE ON STATE OR LOCAL GOVERNMENT

Regulation No. 201 KAR 8:580.

Contact Person: Brian K. Bishop, Executive Director,
Board of Dentistry

1. Does this administrative regulation relate to any program, service, or requirements of a state or local government (including cities, counties, fire departments, or school districts)?

Yes X No

If yes, complete questions 2-4.

2. What units, parts or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation?

The Kentucky Board of Dentistry is the only state government entity which will be impacted by this regulation.

3. Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation.

KRS 313 et. al

4. Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.

There will be no new net fiscal affect on the Kentucky Board of Dentistry as the agency is a fully self funded agency and receives no general fund dollars.

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year?

Compliance with this regulation will provide the agency with enough money to meets its budgetary obligations as set forth in HB1 of the 2010 Extraordinary Session of the General Assembly.

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years?

Compliance with this regulation will provide the agency with enough money to meets its budgetary obligations as set forth in HB1 of the 2010 Extraordinary Session of the General Assembly.

(c) How much will it cost to administer this program for the first year?

FY 2010 – 2011 as allocated in HB 1 from the 2010 Extraordinary Session of the General Assembly is \$705,400

(d) How much will it cost to administer this program for subsequent years?

FY 2011 – 2012 as allocated in HB 1 from the 2010 Extraordinary Session of the General Assembly is \$714,000

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation:

SUMMARY OF MATERIAL INCORPORATED BY REFERENCE

(1) The “Guidelines for Infection Control in Dental Health-Care Settings” is the 76 page newsletter published by the Center for Disease Control (CDC) that outlines the universal precautions all dental health-care providers are required to follow. 2010 Ky. Acts ch. 85, sec. 10 requires the board to define procedures and requirements for compliance with CDC guidelines.

(2) The “Infection Control Inspection Checklist” is the 2 page form used during inspections of dental practices, including charitable dental practices and post-disaster clinics, to verify that the practice is in compliance with CDC guidelines. 2010 Ky. Acts ch. 85, sec. 10 requires the board to define procedures and requirements for compliance with CDC guidelines.